PART B - FEE(S) TRANSMITTAL						
Complete and se	nd this form, toget	he vith applicable	fee(s), to: Mail M	ail Stop ISSUE FE	E	
Complete and send this form, together with applicable fee(s), to: Mai				Commissioner for Patents P.O. Box 1450		
	JUL 1 5 21	(עני טוט	Al	exandria, Virginia	22313-1450	
	12			71)-273-2885	71 1 1 1 1 5 1	14 111
INSTRUCTIONS: This appropriate. All further	form should be used correspondence includi	for Consmitting the ISSU The Patent, advance of	JE FEE and PUBLICAT reders and notification of	TON FEE (if required) maintenance fees will	Blocks I through 5 shoe mailed to the current	ould be completed where correspondence address as
INSTRUCTIONS: This form sould be used for consmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below of the APP between in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.						
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use B	lock 1 for any change of address)	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
7590 04/15/2010 Certificate of Mailing or Transmission						
Peter L. Kendall				I hereby certify that this Ree(s) Transmittal is being denosited with the United		
Roylance, Abrams, Berdo & Goodman, L.L.P. Suite 600				States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
1300 19th Street, N.W.						(Depositor's name)
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				(Date)		
	<b>—</b>					20177711170
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	L AT	TORNEY DOCKET NO.	CONFIRMATION NO.
10/718,815 11/24/2003 Jeong-Wook				000 E #E01 (DIA)	46049	3442
TITLE OF INVENTION: APPARATUS AND METHOD FOR DISPLAYING PICTURES IN A MOBILE TERMINAL .						
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APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/15/2010
EXAM	TIMER	ART UNIT	CLASS-SUBCLASS	1		
HO, TUAN V 2622			348-239000	j		
1. Change of correspond			2. For printing on the patent front page, list			
CFR 1.363).		•	(1) the names of up to 3 registered patent attorneys			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a member a			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3			
Number is required.		icu. Use vi a Cusiomei	listed, no name will be			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Samsung Ele	ectronics Co., Ltd.		Suwon-city, Republic of Korea			
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fec(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee			☑ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.			
✓ Publication Fee (No small entity discount permitted)  ☐ Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any			
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Authorized Signature		<b>/</b>	Date 07/18/2512015EWDIE2 00000011 10718815			
Typed or printed name Simon G. Booth				Registrafib FN 15		1510.00 OP
This collection of inform	ation is required by 37 C	FR 1.311. The information	n is required to obtain or			by the USPTO to process)
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